

Using Looking After Children to create an Australian out-of-home care database

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There is a paucity of publicly available information on Australian children in out-of-home care. Data on the characteristics of children in care, their experiences during placement, and the services provided for them are badly needed to monitor service effectiveness, to identify where service improvements can be made and to ascertain how to improve the allocation of resources. This paper provides a rationale for using information collected on the 'Looking After Children' (LAC) schedules to generate an Australia-wide database on children in out-of-home care, as well as identifying some of the problems to be overcome if the LAC schedules are to be used to collect aggregate data.

THE AUSTRALIAN DATABASE ON CHILDREN IN OUT-OF-HOME CARE

The Australian database on children in out-of-home care is patchy and unreliable. While all statutory child welfare agencies collect data on children under their supervision, there is little consistency in terms of the information collected, and it is generally very difficult to retrieve reliable and relevant information from these datasets, as many information systems require 'surfing' or scanning files to access information on individual cases.

Australia-wide comparability of information collected on children in out-of-home care is also problematic because of the issue of definition and thus categorisation. Since 1996-97 the Australian Institute of Health and Welfare (AIHW) has published national reporting data on children on care and protection orders from administrative datasets in the Child Welfare Series (AIHW, 2002), but cautions that it is impossible to make comparisons across jurisdictions because legislation, policies and definitions of terms vary considerably between the States and Territories. The National Child Protection and Support Services (NCPASS) Data Group (the successor of WELSTAT) has tried to overcome problems in the comparability of child protection data across Australia, and has identified several options for improving comparability, including the adoption of a generic reporting format that relates to the different stages of the Child Protection Process, including initial contact, screening and investigation.

Despite welcome advances that have been visible in Australian data collection through the AIHW initiatives, national reporting data on children in out-of-home care are limited and tend to focus on inputs and key descriptors. They describe the number of children in out-of-home care, the rate of children in out-of-home care, the age of children in out-of-home care, Aboriginal and Torres Strait Islander children in care, types of care, and types of care order.

However, while these data are useful for monitoring broad trends in the number and placement rates of children who are being cared for away from their homes, and how State patterns compare with national norms,

it is not possible to determine national patterns for other important dimensions of care. These include the reasons children are placed in care, how long they stay in care, how

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many are in short-term, medium or long-term arrangements, how many return home, and how many are returning to the care system after failed attempts at restoration (Bath, 1994:9).

Further, national reporting data do not contain information about child outcomes and other critical information that can be used to guide evaluation of the impact of the service on children's long-term life chances, such as the rate of placement disruptions versus planned transitions, changes in care plans, children's needs and reasons for placement.

It is therefore impossible to determine how children's experiences in care relate to an end result for the child. For example, these types of data do not permit *assessment* of the effectiveness of intervention, nor do they allow us to identify significant factors that may have contributed to a particular outcome, which can then be used to inform practice and policy.

Although some important studies have been undertaken on these issues, initiated by governments or non-government service providers, or conducted as part of university-based academic studies, rarely are they of a scale and methodological rigour required to inform policy decisions. Frank Ainsworth notes, for example, that Australian evaluations of family preservation services 'have been small scale and limited in terms of methodological sophistication' (Ainsworth, 1997:12). If we consider the criteria for research required to *inform policy decisions*, the *minimum* should include representative samples or intentionally selected samples of a sub-set of the population (or at least knowledge of selection biases) and a longitudinal prospective design. Very few Australian studies meet these criteria.

It is unsurprising, therefore, that the level of research and policy coordination in out-of-home care in Australia is poor, certainly by international standards. In a forthcoming paper to appear in this journal, Mike Clare (Clare, forthcoming) contrasts research, policy development and evaluation initiatives in the UK to the situation in Australia. While the UK Department of Health has recently spearheaded a number of initiatives to enhance the quality of child and family welfare based on findings from a major body of research funded by the Department in the 1980s and 1990s, there appears to be a different attitude to funding research and gathering data for planning services in Australia. Clare goes on to suggest that we need national standards in the definition of measures of needs and outcomes in out-of-home care that can be used to generate data for local and national policy and planning.

A set of agreed upon measures that are collected and reported Australia-wide are useful for a number of purposes. They can:

- provide information about children's needs;
- provide evidence about child outcomes;

- provide information about service effectiveness;
- identify what processes lead to child welfare improvements;
- identify unmet need and point to areas where new policies are required;
- demonstrate agency strengths and weaknesses;
- detect effects of service and policy changes; and
- be used in research and for testing theories in practice.

This paper argues that the UK *Looking After Children* (hereafter LAC) schedules have the potential for providing a framework for the development of national measures for looked after children. What follows is a rationale for using the LAC measures to produce aggregate data on children in out-of-home care, as well as some of the difficulties that will need to be overcome to achieve this objective, including work on the implementation and revision of the LAC program on an Australia-wide basis.

THE LAC SCHEDULES AND MEASURES

THE DEVELOPMENT OF THE LAC SYSTEM OF SCHEDULES

In 1987, concerns about the developmental progress of children looked after by local authorities led the Department of Health in England to establish a working party of academics and practitioners. Their task was to develop a tool that would produce an aggregate picture of the characteristics of children and young people looked after away from home, the services provided for them, and the outcomes of their experiences. The result of the theoretical framework constructed by the working party is a series of schedules, called the Assessment and Action Records (A&ARs) (Parker, Ward, Jackson, Aldgate & Wedge, 1991).

Originally designed as instruments of research to gain more consistency in the evaluation of outcomes, the A&ARs were ultimately developed with a package of complementary forms, which were designed to encourage the local authorities to integrate them into a comprehensive system for gathering information, making plans and reviewing children's cases. The complete set of practical measures is known as the LAC materials (Department of Health, 1995).

Use of the A&ARs was designed to assist social workers to include 'outcomes planning' in their day-to-day work; that is, to show social workers and carers how what they do or do not do relates to outcomes for the child (see Ward, 1995; 1998:204; Kufeldt, Simard & Vachon, 2000; Jones, Clark, Kufeldt & Norman, 1998; Jackson, 1998).

Six age-related A&ARs involve subjective responses across seven developmental dimensions – health, education, identity, social presentation, emotional and behavioural

development, family and social relationships, and self-care skills¹. These include quantifiable measures of children's progress towards these objectives (for example, an assessment of children's behaviours and emotions to determine psychological adjustment), as well as comprehensive measures relating to whether children are given the type of experiences deemed necessary to success (an input by the service). On the health dimension, for example, the necessary experience includes ensuring that routine immunisations are up-to-date. Aggregate information from the A&ARs will therefore be able to tell us whether the needs of the looked after population are being adequately met.

Although some important studies have been undertaken on these issues, initiated by governments or non-government service providers, or conducted as part of university-based academic studies, rarely are they of a scale and methodological rigour required to inform policy decisions.

Although the decision to use a system of schedules which relies upon workers' subjective ratings has been questioned (see, for example, Huxley, 1994), it was felt that social workers would not be able to use schedules involving standard measures (that is, measures that possess known properties of validity and reliability), or procedures which can only be administered by staff who have specialist training in psychometric assessment, nor would they see it as a legitimate part of social work practice. In the report of the Working Party, Parker et al. (1991:12) state that:

Rather than scales or tests, which might reduce the social worker's role in the assessment to that of a collector of data, we have produced an assessment and action record that is designed to have a direct influence on practice.

The complementary planning and reviewing forms include critical information about the characteristics of children in care, the objectives of placement and what is done (or not done) to achieve success. There are two Essential Information Records (EIRs). The *EIR Part 1* provides information needed immediately by carers, such as the child's language, religion and details of any medical conditions or disabilities. The *EIR Part 2* asks for more comprehensive background information, including any legal orders relating to the child. The *Care Plan* sets out the

objectives for a child's care (for example, eventual return to birth family or adoption/permanent care) and a strategy for achieving them. The two *Placement Plan* documents outline the purpose of the placement in meeting a child's or young person's identified needs and the overall care objective. *Placement Plan Part 1* records why a child has been placed in care and *Placement Plan Part 2* provides detailed information about the day-to-day arrangements made to meet the child's identified needs. The *Review Form* guides the practitioner through a procedure which ensures that the overall *Care Plan* is still appropriate, the placement and its agreed objectives continue to meet the child's or young person's needs and that work identified via the A&ARs or otherwise is being undertaken.

Information from both the A&ARs and the complementary planning and review forms are needed in order to produce a rounded understanding of the effectiveness of services and outcomes of placement in care.

REASONS FOR USING LAC

EXISTING PROJECTS INVOLVING THE USE OF LAC DATA

In the UK, Canada and Australia, research studies are currently under way using LAC to aggregate information on *research* cohorts. At the Centre for Child and Family Research, located at Loughborough University in the UK, researchers have developed a longitudinal study of 242 children based on information generated by LAC. Empirical findings have already been produced about performance on specific indicators, such as children's needs, placement stability and educational experiences, from three rounds of data collection, and findings have been used to inform policy at a national level (Skuse, McDonald & Ward, 2001)

Information has also been produced about the extent to which the LAC materials have been successfully implemented and the availability and accuracy of data gathered through them. A central aim of this study was to evaluate the potential for aggregating LAC data and using it for management and research information. Other researchers have also used LAC in studies in the UK (for example, Brandon, Lewis, Thoburn & Way, 1999; Thoburn, Norford & Rashid, 2000; Thoburn, Wilding & Watson, 2000; Bailey, Thoburn & Wakeham, 2002).

Researchers at the University of Ottawa also are using information recorded on the LAC schedules in 23 Children's Aid Societies in the province of Ontario, Canada, to evaluate child welfare outcomes. The A&ARs have been 'Canadianised' and revised to include many standardised, population-based items and scales from the Canadian National Longitudinal Study of Children and Youth (NLSCY) (Flynn, Ghazal, Moshenko & Westlake, 2001).

¹ No self-care skills are measured for those aged less than one year.

In Australia, an Australian Research Council (ARC) research grant provided initial funding for a longitudinal study of the care paths of children in care with Barnardos. Information recorded on the A&ARs is being used to track children's progress along the seven developmental dimensions specified in the framework for assessment (Dixon, 2001). Results relating to the education section were recently submitted to the NSW Parliamentary Inquiry into the education of children and young people in out-of-home care (2002) (Barnardos Australia and the LAC Project, 2002). Two earlier research projects have also been undertaken in Victoria and Western Australia involving the LAC materials (Wise, 2003; Clare, 1997).

Despite these initial research efforts, '...little has been written about the LAC system as a method of collecting aggregate data to aid planning and resource allocation decisions' (Bailey, Thoburn & Wakeham, 2002:190). Despite the lack of detail about how data gathered through LAC implementation can be used to monitor the progress of children in out-of-home care, there are several reasons to attempt adapting LAC into monitoring tools to collect aggregate data on whole groups of children in care.

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UPTAKE OF LAC IN AUSTRALIA

The LAC system and its theoretical underpinning have been widely accepted in Australia, primarily as a valuable means of improving practice. The more widespread the system becomes, the greater will be the advantages of using it.

LAC is currently used or planned in a number of States and Territories and non-government agencies throughout Australia, and 'the Looking After Children system is now well-known to most Australian out-of-home care agencies' (Barnardos and the LAC Project, 2002:5).

Barnardos Australia introduced the LAC system in all out-of-home care programs in the agency, commencing in January 1997. The complete LAC system has been implemented in WA since late 2001. In December 2000 the ACT fully implemented LAC across all out-of-home care agencies. In Victoria, a collaborative implementation

process is under way to introduce LAC for all children and young people in foster care and residential care across the state. Tasmania is also moving towards a state-wide implementation in 2003. In NSW, the Department of Community Services has LAC in the current Strategic Plan (Barnardos and the LAC Project, 2002).

It makes sense to jump off the Australian implementation of LAC to generate aggregate data on looked after children. Data gathering and record keeping for a significant proportion of the looked after population would occur in the course of everyday work with children and their families, as opposed to being an additional, separate, and rather onerous chore. Development of an alternative system would not be as cost effective or timely, nor would it be likely to gain the 'grass roots' support that LAC currently enjoys.

THE LAC PROJECT

Barnardos Australia with the University of New South Wales formed the LAC Project to encourage other Australian agencies to implement the LAC system. The LAC Project currently holds a Commercial Licence, which enables it to adapt the materials to other State and Territory legislation and practice conditions, and to sell the system (materials and training) to out-of-home care agencies in other States (Barnardos and the LAC Project, 2002:2). Barnardos has also developed a computerised version of Looking After Children – the Looking After Children Electronic System (LACES) – which produces aggregate data on children in out-of-home care.

Although use of LACES is limited to only a handful of agencies, by June 2003, materials developed and licensed through the LAC Project will be used by agencies in New South Wales, Victoria, the ACT and Tasmania. As of 1 July 2003, Barnardos anticipates that this will amount to approximately 8,467 children who are cared for in a 12-month period, regardless of the duration of care. This involves implementation of the planning and placement materials as well as the core A&ARs.

The LAC Project thus ensures a degree of consistency and continuity in the manner in which the LAC system is implemented across Australia, offering the opportunity for standardisation in the measures that may be aggregated for management and research purposes.

LONGITUDINAL DATA

As the LAC system is practice-based, and involves regular updating of information relating to individual children, it provides the opportunity to monitor children's progress over time. This includes tracking children who exit and subsequently re-enter the care system at a later date. This has significant advantages over cross-sectional or 'census' data that is collected at one point in time, as it can help to demonstrate the effect that care experiences and other

variables have on later outcomes, rather than simply describing correlates or relationships between certain factors and outcomes. A central system that allocates a unique number to each child, either within each agency or nationally, would be used to identify individual children so information recorded on them can be tracked longitudinally.

DIFFICULTIES TO BE OVERCOME

INCONSISTENCIES IN IMPLEMENTATION

The LAC Project, however, is no assurance that a single version of the LAC schedules will be consistently used across agencies in Australia. Not all States and Territories implementing LAC have used materials adapted by the LAC Project, opting to tailor the A&ARs themselves in order to meet specific child welfare legislation or agency requirements. There also appears to be some variation in the extent to which LAC is integrated into the planning and review structure of agencies, ranging from implementation of the full system to partial implementation whereby the A&ARs mesh with existing forms and processes. Such inconsistencies will inevitably cause difficulties in establishing a subset of measures that can be gathered and recorded Australia-wide.

Another potential threat to the consistency in which LAC is implemented across Australia is the revision of the A&ARs, which is under way in the UK. The Integrated Children's System (ICS) links the LAC materials with those related to the new Framework for the Assessment of Children in Need and their Families (see Wise, forthcoming) to provide an integrated approach to support social services in meeting their responsibilities for children in need. In the development of the ICS, the A&ARs were drastically modified. The A&ARs are now much shorter, and the assessment process has been taken from an individualistic child level to an assessment that examines child outcomes in the context of family and community characteristics.

Although it is likely that the LAC Project will revise the Australian materials to keep in step with developments in the UK after final piloting of the instruments in 2004, it is currently unclear whether individual States or separate agencies will continue to use existing schedules, adopt the version developed for use as part of the ICS, or even implement the full ICS to integrate family support, child protection and out-of-home care services across local child welfare services.

RELIABILITY AND VALIDITY OF OUTCOMES MEASURES

While the LAC dimensions of well-being are widely accepted as a framework for individual child assessment, it is acknowledged that the outcome measures used on the A&ARs are new and untested, such that the extent to which they possess important properties of validity and reliability are currently unknown.

Thus, many researchers do not rely on the A&ARs and other LAC schedules as their exclusive source of data, but supplement these data, or adapt the schedules, to strengthen the measures used in analysis. As previously mentioned, researchers at the University of Ottawa are incorporating other psychological measures from the NLSCY to test and strengthen the LAC tools, and are using population norms on these measures to compare developmental outcomes for children 'in care' and children 'not in care'.

It would be a significant enhancement to any initiative designed to collect aggregate data on children in out-of-home care if agreement could be reached to incorporate additional, standardised measures on an 'Australianised' version of the A&AR. Measures from the new, large-scale, federally funded Longitudinal Study of Australian Children – *Growing Up in Australia* (Sanson, Nicholson, Ungerer, Zubrick, Wilson, Ainley, Berthelson, Bittman, Broom, Harrison, Rogers, Sawyer, Silburn, Strazdins, Vimpani & Wake, 2002), or measures where Australian norms are already available, are possibilities here. This would enable comparisons to be made between children in care and the broader population of Australian children. It would also provide an opportunity to validate the scales on the A&ARs, and would result in a more rigorous evaluation of child outcomes. The inclusion of a 'life satisfaction' scale based on child report is also worth considering, to strengthen the overall picture or general assessment of children's welfare (see Parker, 1998:197).

The fact that LAC information relies on workers' subjective ratings has been raised earlier in the paper. In respect to the evaluative sections of the A&ARs, research conducted in the UK suggests that reliance on practitioners' ratings can lead to biases in the data.

To praise and encourage, a tiny move forward, or even standing still, may be recorded more positively than a more dispassionate judgement would require (Bailey, Thoburn & Wakeham, 2002:191).

Without use of objective measures or independent raters, the problem of worker bias is likely to remain an issue.

DATA QUALITY

Since the implementation of the revised LAC system of assessment, planning and review tools in 1995 (Department of Health, 1995), there have been a number of audit reports (Moyers, 1997; Peel, 1998; Scott, 1999). These suggest implementation of the system and use of the various forms in the UK has remained 'patchy' (Bell, 1998/99:16). In an unpublished paper, Ward and Skuse (1999) refer to a summary of the evidence of completion and compliance shown in these audits as 70% of completion of the referral and information forms and a lower (36%), and falling, rate of completion of the A&ARs (see Clare, forthcoming). Examination of case files for the purpose of the

Loughborough outcomes cohort also revealed substantial gaps and inaccuracies in recording important information, but showed that the EIRs are the most reliable sources of data on the characteristics of children.

As Scott (1999:23) notes, 'Aggregated information about groups of children will be seriously flawed if only 36% of A&ARs are completed'. Weaknesses in implementation are going to have an effect on the extent and quality of the data available, and, ultimately, the validity of the conclusions that are drawn from the results of analysis.

Although some important studies have been undertaken on these issues, initiated by governments or non-government service providers, or conducted as part of university-based academic studies, rarely are they of a scale and methodological rigour required to inform policy decisions.

There has been no published assessment of the comprehensiveness or accuracy of data collected in the course of implementation of LAC in Australia, and the extent of reporting on these issues within agencies or States is currently unclear. This could be due to the fact that LAC is being introduced to reflect the needs of practice. Agencies have yet to exploit the potential for LAC to provide information about their accommodation and support services, thus the accurate recording of information is perhaps seen as less important as training practitioners in the philosophy and practice of the system.

It should be noted, however, that the value of LAC has been promoted by non-government agencies for some time, with agencies such as Barnardos Australia and Berry Street (Victoria) initiating implementation projects well before State governments recognised the value of the LAC materials to encourage good outcomes for children and young people in care. The evidence from the UK suggests that acceptance of the materials at all levels of an organisation are critical for successful implementation. While front-line staff, agency workers and senior managers will need to have high regard to the benefits of aggregating data and thus the importance of accuracy, careful recording and routine updating of information, the 'grass roots' approach to implementation in Australia may well result in greater compliance than what we have witnessed in the UK.

DATA ACQUISITION

Currently, agencies use a range of different paper- and computer-based systems for recording information collected in the course of implementing LAC. The LAC Project, for example, provides access to a paper-based system, as well as two computer-based LAC information systems – an 'offline' version (LACES Offline) that allows for word processing of the schedules, and a web-based version (LACES), which transforms data entered onto the system into a readily usable electronic database.² This reflects the varying use of computers and computer literacy among field workers across non-government agencies, as well as variations in the level of technical support and fiscal resources for, and prioritisation of, information services development.

It would be most efficient for the purpose of developing a national database if agencies (or governments) were able to provide periodic statistical returns on a verifiable subset of data from the LAC schedules to a central repository. This would require either new computer-based information systems to be developed, modification of existing systems, or transferral from present systems to a common management information system such as LACES. Systems that are designed around LAC for use by practitioners in their daily work have considerable advantages over systems that do not reflect the needs of practice. Information systems that serve practitioners are more likely to be accurate and complete, and avoid 'double-handling' whereby data entry becomes a separate, additional task to implementation.

However, compatibility in the use of an electronic recording system based around LAC is still a long way off. For example, it is not certain whether governments sponsoring State-wide implementation of LAC also plan to support the development of electronic recording systems for centralisation and development of aggregate management information, or whether individual agencies have plans to exploit LAC in this way. Thus, any initiative to aggregate national data from LAC schedules would first need to explore how LAC information is being recorded in order to assess the most efficient method for retrieving information. Until agencies and departments move to computerised systems, this is likely to involve some degree of data entry that is separate to the implementation process. Further, information presented on paper will be spread over many forms and case-recording sheets, so the practice of retrieving this information will be very difficult.

The extent to which LAC information is shared between agencies and government departments is another data acquisition issue. Case management responsibility is likely to determine where LAC information is stored, who has access to what information, and how that information is

² Electronic recording under the LACES system does not involve the A&ARs.

accessed. In the absence of a computerised system (where data sharing and data access issues can be resolved quite readily), retrieving data from the full system of LAC schedules on a single child could involve negotiation with multiple workers from different agencies.

At another level, in the majority of cases, a child's legal status will mean that it is likely (and certainly desirable) that a third party could only have access to case file information with the knowledge and permission of the relevant statutory agency. Implications from amendments to the Commonwealth Privacy Act 1988 for data sharing across agencies will also need to be explored.

CONCLUSION

Although a number of issues need to be addressed before a system is developed which runs smoothly, in theory at least, there is huge potential to use LAC data to progress the quality of management and planning for children in out-of-home care in Australia, and to improve knowledge and transparency about the needs of these children.

Commitment and resources to move from this theoretical position to making national LAC data a practical reality is now needed. Considerable time was allowed to pass between the development of the LAC system in the UK in 1991 and acknowledgement of its value, and hence implementation on a broad scale in Australia early in the new millennium. Let us not sit back and allow unnecessary time to pass before we seize the opportunity to exploit LAC in the way it was originally intended – to produce better information and planning on children in care. □

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